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HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400 ATTORNEY DOCKET NO.

PATENT APPLICATION

200315907-1

Inventor(s):

Daniel R. Blakley

Confirmation No.: 6580

Application No.: 10/758,813

Examiner: R. Holmes

Filing Date:

January 16, 2004

Group Art Unit: 3762

Title: SYNTHESIZING A REFERENCE VALUE IN AN ELECTROCARDIAL WAVEFORM

Mail Stop Amendment **Commissioner For Patents** PO Box 1450 Alexandria, VA 22313-1450

Fort Collins, Colorado 80527-2400

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

No additional fee Other Replacement Sheets (3)					Fee\$					
	CLAIMS AS	AMENDE	D BY OTH	ER THAN A	SMA	LL E	YTITE	•		
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR		(5) PRESENT EXTRA		(6) RATE		(7) ADDITIONAL FEES	
TOTAL CLAIMS	The state of the s		;	32			x	\$50	\$	0
INDEP. CLAIMS	5	MINUS	5		=	0	x	\$200	\$	0
	FIRST PRESENTATIO	N OF A MU	JLTIPLE DE	PENDENT C	LAIM		+	\$360	\$	0
XTENSION FEE	1st Month \$120			3rdMont \$1020			4th Month \$1590		\$	120

Charge \$ 120 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

I hereby certify that this paper is being transmitted to the Patent and Trademark Office facsimile number (571) 273-8300. Date of facsimile: November 24, 2006

Christie A. Doolittle

Respectfully submitted,

Daniel R. Blakley

Βv

Walter W. Karnstein Attorney/Agent for Applicant(s)

Reg No.:

35,565

Date:

November 24, 2006

Telephone: (503) 224-6655

Rev 10/05 (TransAmdFax)

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3762

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Mail Stop Amendment Commissioner For Patents PO Box 1450 Alexandria, VA 22313-1450

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New fee	e/Amendment as calculated below						×		on to ext emental		ime to re laration	
No additional fee Other Replacement Sheets (3)						Fee\$						
	CLAIMS AS	AMENDE	D BY O	THER	THAN A	SMA	LL E	YTITY	,			
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR			PRE	(5) PRESENT EXTRA		(6) RATE		(7) ADDITIONAL FEES	
TOTAL CLAIMS	32	MINUS			=	0	x	\$50	\$	0		
INDEP. CLAIMS	5	MINUS		5		=	0	х	\$200	\$	0	
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EXTENSION FEE	1st Month \$120	2nd I	Month O		3rdMonth \$1020	1		4th Month \$1590		\$	120	
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		Т	OTAL A	סודוס	NAL FEE	FOR	THIS A	MEN	MENT	\$	120	

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